

Abstract 405

TITLE: Systemizing Program Evaluation

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ISSUE: HIV prevention program staff and their community partners have been challenged to demonstrate the effectiveness of interventions and to aggregate data regarding program reach, fidelity, resources, and impact. In Maryland, pressure for such came from four sources: an internal strategic planning process, the statewide Community Planning Group for HIV prevention, CDC as a funding agency, and a gubernatorial directive to develop agency performance standards to coincide with the federal "Managing for Results" initiative.

SETTING: HIV Prevention Program units within the AIDS Administration of the Maryland Department of Health and Mental Hygiene.

PROJECT: A specific program evaluation initiative launched by the Administration in 1997.

RESULTS:

- More than 120 different interventions were organized into 39 programs, with distinct target populations, outcome, and process objectives.
- Standardized units of measure regarding program reach and resources were developed for use by all programs. A standardized report form was instituted to enable community partners to report such information.
- A separate program evaluation division was established in the Administration to assist program staff with conducting outcome and intensive process evaluations.
- A 5-year plan was developed to evaluate process and/or outcomes of all programs.

LESSONS LEARNED:

- Standardization of interventions via program models facilitates evaluation.
- The new CDC Evaluation Guidance is a helpful tool to build consensus among diverse stakeholders regarding program evaluation.
- Strengthening program evaluation requires the participation and commitment of staff and LHD/CBO partner resources if it is to be accomplished.
- Participative evaluation has benefits for stakeholders beyond lessons learned from evaluation.

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